Indiana University Kokomo
Position Request Authorization

REQUEST IS FOR:  NEW POSITION □ REPLACEMENT □

Department/Division ____________________________________________________________

Rank Code/Position Title _________________________________________________________

HOURLY/TEMPORARY _______ TENURE TRACK FACULTY_______
NON TENURE TRACK FACULTY_______ ADMINISTRATIVE _______
CLERICAL _______ TECHNICAL _______ PHYSICAL PLANT _______
   FALL _______ SPRING _______ ACADEMIC YEAR _______

SALARY RANGE ___________________________________________ (lowest to highest)
Salary Minimum _______________ Market Zone Range _____________________________

If this is a replacement request, provide name, budget position number and salary of employee being replaced: _________________________________________________________________
______________________________________________________________________________

Attach a position description.

Position Justification (state in detail the benefits to the unit and campus to be realized if request is approved, as well as affects of disapproval). Attach on a separate sheet.

REQUESTED BY: ________________________________________________________ __________________
Vice Chancellor/Dean/Chairperson/Director       Date

_______________________________________________________ __________________
Appropriate Vice Chancellor/Chief of Staff      Date

________________________________________________________ __________________
Director of Budget Administration (All Positions)        Date

I hereby authorize search and screen procedures to begin action on the above position. Further actions should adhere to the Search and Screen Procedures.

ANTICIPATED DATE OF EMPLOYMENT ________________

REQUEST APPROVED__________________________________________        Chancellor

REQUEST DENIED___________________________________________        ______________________
Date

Attach reason(s) on separate sheet for denial.

REVISION: 4/2015